PTO/SB/06 (12-04)
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PATENT APPLICATION FEE DETERMINATION RECORD
Substitute for Form PTO-875

Application or Docket Number: 10/549 705

APPLICATION AS FILED – PART I

FOR	(Column 1) NUMBER FILED	(Column 2) NUMBER EXTRA	SMALL ENTITY RATE ($)	FEE ($)	OR	OTHER THAN SMALL ENTITY RATE ($)	FEE ($)
BASIC FEE (37 CFR 1.16(a), (b), or (c))				100			
SEARCH FEE (37 CFR 1.16(k), (l), or (m))				100			
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))				100			
TOTAL CLAIMS (37 CFR 1.16(i))	12 minus 20 =	*	x 25 =		OR	x =	
INDEPENDENT CLAIMS (37 CFR 1.16(h))	12 minus 3 =	9	x 100 =	900		x =	
APPLICATION SIZE FEE (37 CFR 1.16(s))	If the specification and drawings exceed 100 sheets of paper, the application size fee due is $250 ($125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).		125				
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))			180				
			TOTAL	1400		TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2.

APPLICATION AS AMENDED – PART II

10-406

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	SMALL ENTITY RATE ($)	ADDI-TIONAL FEE ($)	OR	OTHER THAN SMALL ENTITY RATE ($)	ADDI-TIONAL FEE ($)
Total (37 CFR 1.16(i))	18	Minus	20	=	x 25 =		OR	x =	
Independent (37 CFR 1.16(h))	16	Minus	13	= 3	x 100 =	300	OR	x =	
Application Size Fee (37 CFR 1.16(s))									
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					180		OR		
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

Jud Extra for Indep.

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	SMALL ENTITY RATE ($)	ADDI-TIONAL FEE ($)	OR	OTHER THAN SMALL ENTITY RATE ($)	ADDI-TIONAL FEE ($)
Total (37 CFR 1.16(i))		Minus		=	x =		OR	x =	
Independent (37 CFR 1.16(h))		Minus		=	x =		OR	x =	
Application Size Fee (37 CFR 1.16(s))									
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))							OR		
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.